

Form CPF M 102: Campaign Finance Report Municipal Form

ELECTION DEPT. SOMERVILLE. MA

Office of Campaign and Political Finance

of Massachusetts	File with: City or Town Clerk or Election Commission
Fill in Reporting Period dates: A 8: 58 Beginning Date: Jan	. 1,2012 Ending Date: Dec. 31,2012
Type of Report: (Check one) 8th day preceding preliminary 8th day preceding election	30 day after election X year-end report dissolution
Katjana Ballantyne	Committee To Elect Katjana Ballantyne
Candidate Full Name (if applicable)	Committee Name
Alderman / Ward 7 Somerville	Richard Nilsson
Office Sought and District	Name of Committee Treasurer
49 Russell Road, Somerville, MA 02144	49 Russell Road, Somerville, MA 02144
Residential Address	Committee Mailing Address
Telephone Number (optional):	Telephone Number (optional):
SUMMARY BALANC	CE INFORMATION:
Line 1: Ending Balance from previous report	\$541.93
Line 2: Total receipts this period (page 3, line 11)	\$5,120.55
Line 3: Subtotal (line 1 plus line 2)	\$5,662.48
Line 4: Total expenditures this period (page 5, lin	
Line 5: Ending Balance (line 3 minus line 4)	\$5,145.29
Line 6: Total in-kind contributions this period (pa	age 6) \$0
Line 7: Total (all) outstanding liabilities (page 7)	\$0
Line 8: Name of bank(s) used: Winter Hill Ban	nk / PayPal
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the bes activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind finance activity of all persons acting under the authors of on behalf of this committee in Signed under the penalties of perjury:	contributions and liabilities for this reporting period and represents the campaign accordance with the requirements of M.G.L. c. 55. (Treasurer's signature) Date: Jan. 18, 2013
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 be	ox only)
Candidate with Committee and no activity independent of the committee [XK] I certify that I have examined this report including attached schedules and it is, to the activity, of all persons acting under the authority or on behalf of this committee in actincurred any liabilities nor made any expenditures on my behalf during this reporting	be best of my knowledge and belief, a true and complete statement of all campaign finance scordance with the requirements of M.G.L. c. 55. I have not received any contributions, a period.
Candidate without Committee OR Candidate with independent activity filing so I certify that I have examined this report including attached schedules and it is, to the finance activity, including contributions, loans, receipts, expenditures, disbursement campaign finance activity of all persons acting under the authority or on behalf of the	be best of my knowledge and belief, a true and complete statement of all campaign s, in-kind contributions and liabilities for this reporting period and represents the is committee in accordance with the requirements of M.G.L. c. 55.
Signed under the penalties of perjury:	Date: Jan. 18, 2013

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

Date Received	Name and Residential Address (alphabetical listing required) Amount		Occupation & Employer	
Date Received		Amount	(for contributions of \$200 or more)	
12/01/12	Roberta Bauer 58 Berkeley St.Somerville, MA 021	\$100		
12/15/12	Frederic Berman 25 Cherry St., Somerville, MA 02144	\$200	Senior Associate, National Center for Family Homelessness	
12/10/12	Nancy Bernhard 48 Highland Rd., Somerville, MA 03144	\$100		
12/31/12	Alba Chitouras 10 Packard Ave., Somerville, MA 02	\$100 144		
12/28/12	Greg Dennis 19 Wheaton Rd., Somerville, MA 02	\$100 474		
11/27/12	Joshua Goldman 43 Ossipee Rd. Somerville, MA 0214	\$100		
12/31/12	Maria Jobin-Leeds 675 Mass Ave, Cambridge, MA 02139	\$500	Political Strategist, Partnership for Democracy and Education, LLC	
12/31/12	Greg Jobin-Leeds 675 Mass Ave, Cambridge, MA 02139	\$500	Educator, Partnership for Democracy and Education, LLC	
12/13/12	Stephen Joseph 30 Marlborough St,Boston, MA 02116	\$500	Consultant, self	
12/30/12	Justin Klekota 56 Conwell Ave, Somerville, MA 021	\$500 44	Scientist, Millennium	
12/30/12	Richard Nilsson 49 Russell Rd, Somerville, MA 021	\$500 4	Architect, Nilsson Associates, Ltd.	
12/31/12	Michael Quan 55 Wallace St, Somerville, MA 0214	. \$100 4		
Line 9: Total Rece	ipts over \$50 (or listed above)			
	sipts \$50 and under* (not listed above)			
line 11: TOTAL I	RECEIPTS IN THE PERIOD	,	← Enter on page 1, line 2	

^{*} If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
12/28/12	Barry Rafkind	\$500	Software Engineer, Akamai Technologies
	14 Watson St, Somerville, MA 0214		
12/31/12	Soonae Sakow	\$500	consultant, self
	139 Lincoln Place, Brooklyn, NY 1	2 17	
12/30/12	Stephen Churchill	\$1.00	
	33 Grant St, Somerville, MA 02145		
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Line 9: Total Recei	ipts over \$50 (or listed above)	\$4400.00	
Line 10: Total Rece	ipts \$50 and under* (not listed above)	\$ 720.55	
Line 11: TOTAL I	RECEIPTS IN THE PERIOD	\$5120.55	Enter on page 1, line 2
			Enter on page 1, line 2 d include only those receipts not itemized above.

^{*} If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.)

report all expenditures. Please include your committee name and a page number on each page.) To Whom Paid					
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount	
	Richard Nilsson	49 Russell Road	repaid early 2011	\$370	
2/28/12	Internation National		campaign mailing costs	, , , ,	
		Somerville, MA 02144	Campaign mailing costs		
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		Line 12: Total Expenditures ov	er \$50 (or listed above)	\$370.00	
	•	Line 13: Total Expenditures \$50	and under* (not listed above)	\$147.19	
	Enter on page 1 line 4 →	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD	\$517.19	
		Line 14: TOTAL EXPENDIT			

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

Page 4

SCHEDULE B: EXPENDITURES (continued)

To Whom Paid					
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount	
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		T : 10. ID 311 050	(a. 1; etc. 1 -1,)		
		Line 12: Expenditures over \$50	(or listed above)		
		Line 13: Expenditures \$50 and a	under* (not listed above)		
	<u></u>				
		Line 14: TOTAL EXPENDIT			

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
	·			
		Line 15: In-Kind Contributions	over \$50 (or listed above)	
		Line 16: In-Kind Contributions	\$50 & under (not listed above)	
	Enter on page 1, line 6 →	Line 17: TOTAL IN-KIND CO	ONTRIBUTIONS	\$0

^{*} If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

Page 6

SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
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		. 1		
				\$0